



## TUTORING APPLICATION FORM

**Evelyn Mack Academy**  
**6850 Monroe Road**  
**Charlotte, NC 28212**  
**(704) 535-8304**  
**We make the difference!**

Child's Name:  Age

Address:

City:  State:  Zip

Phone:  Birthdate:  Today's Date

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School Attending Date  Grade:

School Attending Address

Teacher's Name:  Phone:

Father's Name:  D.L#

Employer  Phone:

Mother's Name  Phone:

Employer:  Phone:

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What Do You Wish to have your child enrolled in the tutoring center?

Please list convenient days and times for conferences.

Please list any information /skills that may be helpful in assessing your child's current academic performance.  
 (You may use the back of this form if needed to include additional information.)

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How did you hear about us? Radio  Television  Friends  Other